Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

8 8 26 5 - 655

CLAIMS AS FILED - PART I							SN	SMALL ENTITY		OTHER THAN		
			(Column 1)		(Column 2)		TY	TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS			16					RATE	FEE	P 2 - 1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		В/	ASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			14 mir	nus 20=	*		<u>,</u> 4 =	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			ر minus 3 = *					X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT					-			+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in						olumn 2		TOTAL		OR	TOTAL	710
CLAIMS AS AMENDED - PART II								•	* * *	Freist Warre	OTHER	THAN
(Column 1) (Column 2) (Column 2)						(Column 3)		SMALL E	NTITY :	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	,	RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=	*	OR	X\$18=	• • • •
	Independent	*	Minus	***	T OL AUA	=		X40=		OR	X80=	-)-
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						4	+135=	A contractor on specifical	OR'	+270=	
-							<u> </u>	TOTAL		OR	TOTAL	
y***								DIT. FEE			ADDIT. FEE	
		(Column 1)			mn 2) HEST	(Column 3)						
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	-
	Independent	*	Minus	***	T CL AINA	= '		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	OLITE DE	PENDEN	CLAIM		」 [.	+135=		OR	+270=	
				.• • • • • •			AD.	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	·
		(Column 1)			ımn 2)	(Column 3)			•			-
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUA PREVI	HEST MBER NOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus ,	**		=		X\$ 9=	net strengerijs	OR	∗ X\$18=	
	Independent	•	Minus	***		=	┨┞	X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
* If the ntry in column 1 is less than the entry in column 2, writ "0" in column 3.								TOTAL			TOTAL	
***	** If th "Highest Number Previously Paid F or" IN THIS SPACE is less than 20, enter "20." ***If th "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "High st Number Previously Paid For" (T tal or Ind pend nt) is the highest number found in the appropriate box in column 1.											